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CONFIRMATION NO. 4778

<b>SERIAL NUMBER</b> 09/584,669	<b>FILING OR 371(c) DATE</b> 06/01/2000 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1654	<b>ATTORNEY DOCKET NO.</b> 62805.00020
<b>APPLICANTS</b> Edward Moacrieff Sellers, Toronto, CANADA; Rachel F. Tyndale, Toronto, CANADA;				
<b>** CONTINUING DATA *****</b> This application is a CON of PCT/CA98/01093 12/01/1998 and claims benefit of 60/067,020 12/01/1997 and claims benefit of 60/067,021 12/01/1997 and claims benefit of 60/084,847 05/08/1998 and claims benefit of 60/107,392 11/06/1998				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 07/25/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CANADA	<b>SHEETS DRAWING</b> 23	<b>TOTAL CLAIMS</b> 34
		<b>INDEPENDENT CLAIMS</b> 5		
<b>ADDRESS</b> 1059 AIR MAIL				
<b>TITLE</b> THERAPEUTIC AND DIAGNOSTIC METHODS DEPENDENT ON CYP2A ENZYMES				
<b>FILING FEE RECEIVED</b> 2152	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	